

## Equality, Good Relations and Human Rights Screening Template

**\*\*\*Completed Screening Templates are public documents and will be posted on the Trust's website\*\*\***

See [Guidance Notes](#) for further background information on the relevant legislation and for help in answering the questions on this template (follow the links).

### **(1) Information about the Policy/Proposal**

(1.1) Name of the policy/proposal

Physiotherapy service departmental policy on the use of acupuncture in clinical practice.

(1.2) Is this a new, existing or revised policy/proposal?

New Physiotherapy Policy

(1.3) What is it trying to achieve (intended aims/outcomes)?

- Standardise the use of acupuncture trust wide
- Ensure all clinicians are adhering to safe practice guidelines when using acupuncture with patients.

(1.4) Are there any Section 75 categories (see list in 3.1) which might be expected to benefit from the intended policy/proposal?

Service enhancement and standardisation of practice which will benefit all users



(1.5) Who owns and who implements the policy/proposal - where does it originate, for example DHSSPS, HSCB?

South Eastern Trust

(1.6) Are there any factors that could contribute to/detract from the intended aim/outcome of the policy/proposal/decision? (Financial, legislative or other constraints?)

Nil of Note

(1.7) Who are the internal and external stakeholders (actual or potential) that the policy/proposal/decision could impact upon? (**staff, service users, other public sector organisations, , trade unions, professional bodies, independent sector, voluntary and community groups etc**)

- Staff
- Service Users

(1.8) Other policies with a bearing on this policy/proposal (for example regional policies) - what are they and who owns them?

Policy for the management of blood and bodily fluid exposure (SET/PtCt Care (09) 2009).

Policy on reporting and management of near misses and incidents (SET/H&S (04) 2009).

Policy on the safe handling and disposal of sharps (SET/PtCtCare (26) 2010)

Acupuncture Association of Chartered Physiotherapists guidelines for safe practice Issue 1.11, October 2007.

## (2) Available evidence

Evidence to help inform the screening process may take many forms. What evidence/information (both qualitative and quantitative) have you gathered to inform this policy? Specify details for relevant Section 75 categories.

<i>Details of evidence/information</i>
<p>Professional knowledge.</p> <p>Acupuncture Association of Chartered Physiotherapists (AACP) guidelines for safe practice. Issue 1.11, October 2007.</p> <p>Low back pain: Early management of persistent non-specific low back pain. NICE guidelines 2009.</p>

## (3) Needs, experiences and priorities

(3.1) Taking into account the information above what are the different needs, experiences and priorities of each of the Section 75 categories and for both service users and staff.

<b>Category</b>	<b>Needs, experiences and priorities</b>	
	<b>Service users</b>	<b>Staff</b>
Gender	Ensure safe and effective care for all service users.	Standardisation of the use of acupuncture trust wide for all staff.
Age	Ensure safe and effective care for all service users.	Standardisation of the use of acupuncture trust wide for all staff.
Religion	Ensure safe and effective care for all service users.	Standardisation of the use of acupuncture trust wide for all staff.
Political Opinion	Ensure safe and effective care for all service users.	Standardisation of the use of acupuncture trust wide for all staff.

Marital Status	Ensure safe and effective care for all service users.	Standardisation of the use of acupuncture trust wide for all staff.
Dependent Status	Ensure safe and effective care for all service users.	Standardisation of the use of acupuncture trust wide for all staff.
Disability	Ensure safe and effective care for all service users.	Standardisation of the use of acupuncture trust wide for all staff.
Ethnicity	Ensure safe and effective care for all service users.	Standardisation of the use of acupuncture trust wide for all staff.
Sexual Orientation	Ensure safe and effective care for all service users.	Standardisation of the use of acupuncture trust wide for all staff.

(3.2) Provide details of how you have involved stakeholders, views of colleagues, service users and staff etc when screening this policy/proposal.

**Draft policy sent out to all relevant team leads of staff trained in acupuncture trust wide.**

**AACP guidelines widely involved key stakeholders**

#### (4) Screening Questions

You now have to assess whether the impact of the policy/proposal is major, minor or none. You will need to make an informed judgement based on the information you have gathered.

##### **(4.1) What is the likely impact of equality of opportunity for those affected by this policy/proposal, for each of the Section 75 equality categories?**

<b>Section 75 category</b>	<b>Details of policy/proposal impact</b>		<b>Level of impact? Minor/major/none</b>
	<b>Services Users</b>	<b>Staff</b>	
Gender	Equal Usage	Majority Female	None
Age	Majority 16-65	Majority 25-40	None
Religion	From all religious backgrounds	From all religious backgrounds	None
Political Opinion	3 out of 4 councils have unionist majority	3 out of 4 councils have unionist majority	None
Marital Status	Various status	Majority married	None
Dependent Status	Low numbers with carers	Correlation women and caring responsibilities	None
Disability	Varying levels of disability	Under-reporting	None
Ethnicity	Majority White	Majority White	None
Sexual Orientation	L G B 6 – 10%	L G B 6 – 10%	None

##### **(4.2) Are there opportunities to better promote equality of opportunity for people within Section 75 equality categories?**

<b>Section 75 category</b>	<b>Please provide details</b>
Gender	Service improvement
Age	Service improvement
Religion	Service improvement

Political Opinion	Service improvement
Marital Status	Service improvement
Dependent Status	Service improvement
Disability	Service improvement
Ethnicity	Service improvement
Sexual Orientation	Service improvement

**(4.3) To what extent is the policy/proposal likely to impact on good relations between people of different religious belief, political opinion or racial group? minor/major/none**

<b>Good relations category</b>	<b>Details of policy/proposal impact</b>	<b>Level of impact Minor/major/none</b>
Religious belief	Nil of note	None
Political opinion	Nil of note	None
Racial group	Nil of note	None

**(4.4) Are there opportunities to better promote good relations between people of different religious belief, political opinion or racial group?**

<b>Good relations category</b>	<b>Please provide details</b>
Religious belief	Nil of note
Political opinion	Nil of note
Racial group	Nil of note

## (5) Consideration of Disability Duties

***(5.1) How does the policy/proposal encourage disabled people to participate in public life and promote positive attitudes towards disabled people?***

The use of acupuncture in clinical practice helps some disabled to participate more fully in public life and help promote positive images by addressing issues of pain.

## (6) Consideration of Human Rights

(6.1) Does the policy/proposal affect anyone's Human Rights?

Complete for each of the articles

Article	Positive impact	Negative impact = human right interfered with or restricted	Neutral impact
Article 2 – Right to life			X
Article 3 – Right to freedom from torture, inhuman or degrading treatment or punishment			X
Article 4 – Right to freedom from slavery, servitude & forced or compulsory labour			X
Article 5 – Right to liberty & security of person			X
Article 6 – Right to a fair & public trial within a reasonable time			X
Article 7 – Right to freedom from retrospective criminal law & no punishment without law			X
Article 8 – Right to respect for private & family life,			X

home and correspondence.			
Article 9 – Right to freedom of thought, conscience & religion			X
Article 10 – Right to freedom of expression			X
Article 11 – Right to freedom of assembly & association			X
Article 12 – Right to marry & found a family			X
Article 14 – Prohibition of discrimination in the enjoyment of the convention rights			X
1 <sup>st</sup> protocol Article 1 – Right to a peaceful enjoyment of possessions & protection of property			X
1 <sup>st</sup> protocol Article 2 – Right of access to education			X

**Please note: If you have identified potential negative impact in relation to any of the Articles in the table above, speak to your line manager and/or Equality Unit. It may also be necessary to seek legal advice.**

(6.2) Please outline any actions you will take to promote awareness of human rights and evidence that human rights have been taken into consideration in decision making processes.

Training  
Patients consent to treatment

## (7) Screening Decision

**(7.1) Given the answers in Section 4, how would you categorise the impacts of this policy/proposal?**

Major impact	
Minor impact	
No impact	x



**(7.2) Do you consider the policy/proposal needs to be subjected to ongoing screening**

Yes	
No	x

**(7.3) Do you think the policy/proposal should be subject to and Equality Impact Assessment (EQIA)?**

Yes	
No	x

(7.4) Please give reasons for your decision and detail any mitigation considered.

This is a clinical and technical policy.

**(8) Monitoring**

Please detail how you will monitor the effect of the policy/proposal for equality of opportunity and good relations, disability duties and human rights?

Majority Usage

Compliments/complaints in the area

Monitor clinical effectiveness with clinical audits

Approved Lead Officer: Margaret O'Hare

Position: Physiotherapy Governance Lead

Date: 14/5/19

Policy/proposal screened by: Ellis Campbell

**Please forward completed schedule to:**

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